## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/5802-07

FILING DATE

APPLICANT(S)

## **CLAIMS**

	AS F	ILED		TER IDMENT		TER NDMENT		AS F	ILED		TER NDMENT	2 ™
	IND.	DEP.	IND.	DEP.	IND.	DEP.	1	IND.	DEP.	IND.	DEP.	IN
	7						51					
,		$\geq$					52					
<u>-</u>							53	<del></del>				
							54					<u> </u>
_	<u> </u>						55					
_							56 57					
			· ·				58					
							59					
							60					
							61		* 1	1		
							62			,		
							63			<u> </u>		· · · · ·
$\dashv$							64					
				F			65 66					
							67			<del></del>		<b> </b>
							68					
,				T.			69					
_						Ŷ	70					
-							. 71					
-		/_/		·			72					
-		, ,					73 74					
٦		' /				· · · · ·	75			·		
		7					76					
							77					
_	]						78					
4							79					
-							80			···		
+		<del></del>	<del></del>				81 82					
1							83					
ı							84	7				·
							85			<del></del>		
4		H 6					86					
1							87					
-		··					88					
+		<del></del>				· ·	89					
t							90 91					<u> </u>
ľ							92					<del> </del>
Ī							93					
Ţ							94					
4							95					
4							96					
ł							97		,			
ł							98					
ŀ			·				99		<del></del>			ļ
t				_			100 TOTAL					
1	3	▼ [		▼		- →	IND.		+		♣	
T	7	<u> </u>		<u> </u>		<u> </u>	TOTAL		_		اليا	
		No. of Contract of	100	7		_	DEP.	*************			7	1
	10						TOTAL CLAIMS			( )		
			14	Account for the second		Constitution of the					80 2 12 12 14 N	